

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 13, 2007 08:00 AM
Secretary of State

DOCUMENT # N02000001495

1. Entity Name
**FAIRWAYS HOMEOWNERS ASSOCIATION AT BAY
POINT, INC.**



Principal Place of Business
**204 GOLF CIRCLE
PANAMA CITY, FL 32411**

Mailing Address
**P.O. BOX 27292
PANAMA CITY, FL 32411**

DO NOT WRITE IN THIS SPACE



02212007 No Chg-NP CR2E037 (4/06)

4. FEI Number
59-3238518

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HESS, BRIAN D
9108 FRONT BEACH ROAD
PANAMA CITY BEACH, FL 32407**

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IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FARRELL, KENNETH G 204 GOLF CIR. PANAMA CITY, FL 32411
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GADD, ANNE 112 GOLF DR. PANAMA CITY, FL 32411
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FARRELL, MARY C 204 GOLF CIRCLE PANAMA CITY, FL 32411
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03/23/07-80009-005 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kenneth G. Farrell Kenneth G. FARRELL 850-234-1408
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #